Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 1 of 71

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yoursel | lf | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Denise | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Franklin | |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | | |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 3362 | |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification numbe | 9 xx - xx- | 9 xx - xx- |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 2 of 71

| D | ebtor 1 Denise | | Case number (if known) |
|----|--|---|--|
| | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 7803 S King Dr Number Street | Number Street |
| | | | |
| | | ChicagoIllinois60619CityStateZip Code | City State Zip Code |
| | | Cook County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | City State Zip Code | City State Zip Code |
| 6 | Why you are | city Citato Lip code | City Citate 2:p code |
| 0. | choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 3 of 71

| Deb | otor 1 Denise | | Franklin | Case number (if k | nown) |
|--------|---|---|--|---|---|
| | First Name | Middle Name | Last Name | | |
| Pari | Tell the Court Abo | ut Your Bankruptcy Case | | | |
| l a | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief desc Bankruptcy (Form B2010)). A Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | C. § 342(b) for Individuals Filing for ropriate box. |
| | How you will pay the fee | more details about how cashier's check, or mor may pay with a credit common may be a common may | wyou may pay. Typically ney order If your attorn ard or check with a pre-part in installments. If you che the religion of the religion of the waived (You may required to, waive your feath applies to your fame, you must fill out the Apylication. | , if you are paying they is submitting your printed address. Hoose this option, sints (Official Form 10 uest this option on ite, and may do so or ally size and you are | In the clerk's office in your local court for the fee yourself, you may pay with cash, our payment on your behalf, your attorney and attach the <i>Application for</i> (3A). By if you are filing for Chapter 7. By law, a cally if your income is less than 150% of the unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| ı | Have you filed for bankruptcy within the ast 8 years? | Ves. District District District | V | Vhen | Case number |
| 1 | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | | When MM / DD / YYYYY When MM / DD / YYYY | Relationship to you Case number, if known |
| | Do you rent your residence? | ✓ No. Go to line Yes. Fill out <i>Init</i> . | 12. | | lo you want to stay in your residence? nst You (Form 101A) and file it with |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 4 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 5 of 71

 Debtor 1
 Denise
 Franklin
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 6 of 71

| Debtor 1 Denise | | • | number (if known) | |
|---|--|---|---|---|
| First Name | | ast Name | | |
| Part 6: Answer These Que | estions for Reporting Purposes | | | |
| 16. What kind of debts do you have? | "incurred by an individual p No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily by | primarily for a personal, fan pusiness debts? Business vestment or through the op | ner debts are defined in 11 U.S.C. § nily, or household purpose." debts are debts that you incurred to peration of the business or investmer debts or business debts. | o obtain |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fu | | any exempt property is excluded and a ute to unsecured creditors? | ıdministrative |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,00 More than 100, | 00 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 i \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 1-\$10 billion 01-\$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | □ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 i \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5 | 0 million | 1-\$10 billion 01-\$50 billion |
| Sign below | 11 | .11.1 | | La Carta de la carta |
| For you | correct. If I have chosen to file under Chaof title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain | apter 7, I am aware that I ma understand the relief availa I I did not pay or agree to pa led and read the notice requ | f perjury that the information proviously proceed, if eligible, under Chapter able under each chapter, and I choos ay someone who is not an attorney uired by 11 U.S.C. § 342(b). Inited States Code, specified in this | er 7, 11,12, or 13 ose to proceed to help me fill |
| | connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1 | ase can result in fines up to 519, and 3571. | y, or obtaining money or property by \$250,000, or imprisonment for up | |
| | /s/ Denise Franklin | × | | |
| | Signature of Debtor 1 | | Signature of Debtor 2 | |
| | Executed on 2/14/2017 MM / DD | / YYYY | Executed onMM / DD / YYYY | , _ |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 7 of 71

| Debtor 1 Denise | | Franklin | Case number (if | known) |
|--|----------------------------|-----------------------|------------------------------|--|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | r an inquiry that the | information in the sched | ules filed with the petition is incorrect. |
| attorney, you do not | . . | . , | | · |
| need to file this page. | /s/ Jason Diaz | | Date | 2/14/2017 |
| | Signature of Attorney f | or Debtor | | M / DD / YYYY |
| | | | | |
| | | | | |
| | Jason Diaz | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | enue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3129130625 | Email address | jdiaz@semradlaw.com |
| | | | | |
| | | | Illinois | <u> </u> |
| | Bar number | | State | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 8 of 71

| mation to identify your c | ase: | | |
|---------------------------|------------------------------|--|--|
| Denise | | Franklin | |
| First Name | Middle Name | Last Name | |
| | | | |
| First Name | Middle Name | Last Name | |
| Bankruptcy Court for the: | Northern | District of Illinois | |
| | | (State) | |
| | | | |
| | Denise First Name First Name | First Name Middle Name First Name Middle Name | Denise Franklin First Name Middle Name Last Name First Name Middle Name Last Name Bankruptcy Court for the: Northern District of Illinois |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | Ф0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$40,314.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$40,314.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$40,585.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$3,500.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| , | \$51,410.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | |
| | \$95,495.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$95,495.00 |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 9 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,721.47 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$3,500.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$3,500.00

9g. Total. Add lines 9a through 9f.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 10 of 71

| | | | | | r age 10 or 1 | _ | | |
|--|---|---|--|-----------------------|---|---------------------|---|---|
| Fill in this | information to | o identify your ca | ase: | | | | | |
| Debtor 1 | Denise | | | | Franklin | | | |
| Debtor 2 | First Na | ame | Middle N | lame | Last Name | | | |
| (Spouse, if fi | ling) First Na | ame | Middle N | lame | Last Name | | | |
| United Sta | ates Bankrupto | y Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | nber | | | | | | | _ |
| Officia | al Form 1 | 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A/I | B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where you thi le for supplyir name and ca | nk it fits best. B ng correct inform ase number (if k | se as complete a mation. If more s nown). Answer e | nd ac pace very | asset only once. If an asset fits in more curate as possible. If two married pec is needed, attach a separate sheet to question. r Other Real Estate You Own or I | ople are this fo | e filing together, both a rm. On the top of any a | re equally |
| 1. Do you | ı own or have | any legal or eq | uitable interest | in an | y residence, building, land, or similar រុ | oropert | y? | |
| ~ | No. Go to Pa | rt 2 | | | | | | |
| | Yes. Where is | the property? | | | | | | |
| 1.1 | Street address | s, if available, or o | other description | Wha | at is the property? Check all that apply. Single-family home Duplex or multi-unit building | | the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D:</i> hims Secured by Property. |
| | | | | H | Condominium or cooperative | | Current value of the | Current value of the |
| | | | | H | Manufactured or mobile home | | entire property? | portion you own? |
| | Number | Street | | | Land | | | |
| | Number | Street | | | Investment property Timeshare | | Describe the nature o interest (such as fee s the entireties, or a life | simple, tenancy by |
| | City | State | Zip Code | Ħ | Other | | | |
| | | | | Who | o has an interest in the property? Chec | ck | Check if this is co (see instructions) | mmunity property |
| | | | | Ш | Debtor 1 only | | _ | |
| | | | | | Debtor 2 only | | | |
| | | | | Ш | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | |
| | | | | Ш | | | | |
| | | | | | er information you wish to add about perty identification number: | this ite | m, such as local | |
| If you | own or have r | nore than one, lis | st here: | | | | | |
| | | | | | at is the property? Check all that apply. | | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2 | Street address | s, if available, or o | other description | Ш | Single-family home | | | nims Secured by Property. |
| | | | | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | | | Condominium or cooperative Manufactured or mobile home | | entire property? | portion you own? |
| | | | | | Land | | | |
| | Number | Street | | H | Investment property | | Describe the nature o | |
| | | | | H | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | Ħ | Other | | | |
| | | | | Wh one | o has an interest in the property? Chec | ck | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and another | | | |
| | | | | | er information you wish to add about to perty identification number: | this ite | m, such as local | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 11 of 71

| Debtor 1 | Denise First Name | Middle Name | Franklin Last Name | Case numbe | (if known) | |
|-------------|---|--|--|------------------|---|--|
| 1.3 Stre | et address, if available, or o | | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |
| Nur | nber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [[[| Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | nother | (see instructions) | mmunity property |
| | the dollar value of the pove attached for Part 1. W | ortion you own for a rite that number h | . | uding any entrie | s for pages | |
| | Describe Your Vehicle | | t in any vehicles, whether they are | registered or no | t? Include any vehicles | |
| you own t | hat someone else drives. If ins, trucks, tractors, sport u | you lease a vehicle, | also report it on Schedule G: Executo | - | - | |
| 3.1 | Make Model: | Jeep Grand Cherokee | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Year: Approximate mileage: Other information: | 2016 7000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community | | Current value of the entire property? \$33114.00 | Current value of the portion you own? \$33114.00 |
| 3.2 | Make Model: Year: | | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 12 of 71

| 3.3 M M Ye | rst Name | Middle Name | | | | |
|---|--|-------------|---|--|---|--|
| M Ye | | | Last Name | | | |
| Ye | иаке Model: | | Who has an interest in the pone. | property? Check | Do not deduct secured the amount of any secu | • |
| | viodei. /ear: | | Debtor 1 only | | Creditors Who Have Cla | |
| Ar | Approximate mileage: | · | = ' | | | , , |
| - 1 | +6 | | Debtor 2 only | | Current value of the | Current value of the |
| 0 | Other information: | | Debtor 1 and Debtor 2 on | ıly | entire property? | portion you own? |
| | | | At least one of the debtors | s and another | | |
| | | | Check if this is commur | nity property (see | | |
| | | | instructions) | | | |
| 3.4 M | Make | | Who has an interest in the | property? Check | Do not deduct secured | • |
| | Model: | | one. | | the amount of any secu | |
| | /ear: | | Debtor 1 only | | Creditors Who Have Cla | ims Secured by Propert |
| Ap | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| 0 | Other information: | | Debtor 1 and Debtor 2 on | ıly | entire property? | portion you own? |
| | | | At least one of the debtors | s and another | | |
| | | | Check if this is commur | nity property (see | | |
| | | | instructions) | | | |
| Example No | oles: Boats, trailers, motors o | • | er recreational vehicles, other t, fishing vessels, snowmobiles, r | • | | |
| No Yes | oles: Boats, trailers, motors o | • | er recreational vehicles, other | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Example ✓ No Yes 4.1 M M Yes | oles: Boats, trailers, motors o es Make Model: Year: | • | er recreational vehicles, other t, fishing vessels, snowmobiles, r Who has an interest in the p | motorcycle accessor | Do not deduct secured | red claims on <i>Schedule</i> |
| Example ✓ No — Yes 4.1 M M Yes | oles: Boats, trailers, motors o es Make Model: | • | who has an interest in the pone. | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| V No Yes 4.1 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: Year: | • | who has an interest in the pone. Debtor 1 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| No Yes 4.1 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only | notorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule lims Secured by Propert Current value of the |
| No Yes 4.1 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors | property? Check Ily s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule lims Secured by Propert Current value of the |
| V No Yes 4.1 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 on | property? Check Ily s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule lims Secured by Propert Current value of the |
| No Yes 4.1 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: Other information: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communication. | property? Check Ity s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert Current value of the portion you own? |
| Example No No Yes 4.1 M M Yes Ar O 4.2 M | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: Other information: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) | property? Check Ity s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule in S |
| Example No No Yes 4.1 M M Yes Ar O 4.2 M M | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: Other information: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. | property? Check Ity s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Forced claims on Schedule |
| Example No Yes 4.1 M M Yes Ar O 4.2 M M Yes | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: Other information: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions) Who has an interest in the pone. | property? Check Ily s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Forced claims on Schedule |
| Example Vec No Yes 4.1 M M Yes Ap 4.2 M M Yes Ap Ap | oles: Boats, trailers, motors o es Make Model: /ear: Approximate mileage: Other information: Make Model: /ear: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors instructions) Who has an interest in the pone. Debtor 1 and Debtor 2 on Debtor 3 and Debtor 4 debtors instructions) | property? Check Ily s and another Inity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule ims Secured by Propert |
| Example No Yes 4.1 M M Yes Ap 4.2 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 and Debtor 2 on At least one of the debtors. Check if this is communinstructions) Who has an interest in the pone. Debtor 1 and Debtor 2 on Debtor 1 only. Debtor 2 only | property? Check ly s and another nity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule ims Secured by Propert Current value of the |
| Example No Yes 4.1 M M Yes Ap 4.2 M M Yes Ap | oles: Boats, trailers, motors o es Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 and Debtor 2 on At least one of the debtors instructions) Who has an interest in the pone. Debtor 1 and Debtor 2 on Debtor 2 on the debtors instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 on Debtor 2 only | property? Check If y s and another Inty property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule ims Secured by Propert Current value of the |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 13 of 71

| D | ebtor 1 | Denise | AP 1 11 AV | Franklin | Case number (if known) | |
|----------|-------------------------|---------------------------------|--|---------------------------------------|----------------------------------|--|
| Do | w+ 0. | First Name | Middle Name Tour Personal and Household Ite | Last Name | | |
| | | | e any legal or equitable interes | | g items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | - | and furnishings liances, fumiture, linens, china, kitchen | ware | | |
| | No | | | | | |
| ✓ | Yes. L | Describe | Bedroom Set (Mattress/Dresser/Desk) | | | \$400.00 |
| | | ronics les: Television | s and radios; audio, video, stereo, and | digital equipment; compute | ers, printers, scanners; music | |
| ✓ | Yes. [| Describe | Cellular Phone/Television/Laptop/Table | et | | \$400.00 |
| | Examp No | | ue and figurines; paintings, prints, or other in, or baseball card collections; other c | · · · · · · · · · · · · · · · · · · · | | |
| ш | | | | | | |
| | | les: Sports, ph | orts and hobbies notographic, exercise, and other hobby is; carpentry tools; musical instruments | | tables, golf clubs, skis; canoes | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and related | d equipment | | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| | | | clothes, furs, leather coats, designer we | ear, shoes, accessories | | |
| Ш | No Voc 1 | Describe | Lload Clathing | | | |
| ⊻ | Tes. L | Describe | Used Clothing | | | \$300.00 |
| | | - | ewelry, costume jewelry, engagement i | rings, wedding rings, heirlod | om jewelry, watches, gems, | |
| | No I Yes T | Describe | | | | |
| Ш | 103. L | , | | | | |
| | | -farm animal les: Dogs, cats | s s, birds, horses | | | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| _1 | | other persor | nal and household items you did not | already list, including an | y health aids you did not list | |
| ✓ | No | | | | | |
| | Yes. [| Describe | | | | |
| | | | lue of all of your entries from Part 3 | 3, including any entries fo | r pages you have attached | \$1300.00 |
| f | or Part | : 3. Write that | t number here | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 14 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$450.00 17.1. Checking account: Ally Bank 17.2. Checking account: 17.3. Savings account: Ally Bank \$150.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 15 of 71

| Debt | tor 1 Denise | | Franklin | Case number (if known) | |
|------|--------------------------|---|-------------------------------|--|----------|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotia include personal checks, cashiers ents are those you cannot transfe Issuer name: | s' checks, promissory not | es, and money orders. | |
| 21. | Retirement or pension | |) theift againg accounts | or other pension or profit charing plans | |
| | _ | RA, ERISA, Reogn, 401(k), 403(k |), trinit savings accounts | , or other pension or profit-sharing plans | |
| | No No | Type of account: | Institution name: | | |
| | ✓ Yes. List each account | 401(k) or similar plan: | 401k | | \$300.00 |
| | separately. | Pension plan: | | | - |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | - |
| | | Additional account: | | | - |
| | | Additional account: | | | - |
| 22. | | prepayments d deposits you have made so tha with landlords, prepaid rent, publ Electric: | | | |
| | | Gas: | | | _ |
| | | Heating oil: | | | _ |
| | | Security deposit on rental unit: | | | _ |
| | | Prepaid rent: | | | _ |
| | | Telephone: | | | |
| | | Water: | | | _ |
| | | Rented furniture: | | | |
| | | Other: | | | _ |
| 23. | Annuities (A contract f | or a periodic payment of money t | o you, either for life or for | a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | - | | | |
| | | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 16 of 71

| Debt | or 1 Denise | Franklin Case number (if k | nown) |
|------|--|---|---|
| 24. | First Name Interests in a | Middle Name Last Name an education IRA, in an account in a qualified ABLE program, or under a qualified state | tuition program. |
| | | 530(b)(1), 529A(b), and 529(b)(1). | |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c |): |
| | | | |
| | | | |
| 25. | | able or future interests in property (other than anything listed in line 1), and rights or po for your benefit | owers |
| | ✓ No | ovih o | |
| | Yes. Desc | Cribe | |
| 26. | Patents, cop | oyrights, trademarks, trade secrets, and other intellectual property | |
| | | ternet domain names, websites, proceeds from royalties and licensing agreements | |
| | ✓ No Yes. Desc | cribe | |
| | | | |
| 27. | | anchises, and other general intangibles | Parameter |
| | No No | uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional | licenses |
| | Yes. Desc | cribe | |
| | | | |
| | | | |
| Mor | ney or propei | rty owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or propei | | portion you own? Do not deduct secured |
| | Tax refunds o | owed to you | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give sabou | specific information ut them, including whether | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 |
| | Tax refunds or No Yes. Give sabout your a | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and to | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabou you a and the samples: Past | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years Loca rt st due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, p | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 e: \$0.00 al: \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 e: \$0.00 al: \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 e: \$0.00 al: \$0.00 property settlement ony: \$0.00 atenance: \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 e: \$0.00 al: \$0.00 property settlement ony: \$0.00 atenance: \$0.00 |
| 28. | Tax refunds or No Yes. Give sabout you a and to Family support Examples: Past | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 s: \$0.00 al: \$0.00 property settlement ony: \$0.00 attenance: \$0.00 port: \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 al: \$0.00 property settlement ony: \$0.00 atenance: \$0.00 property settlement: \$0.00 property settlement: \$0.00 property settlement: \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and to Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 al: \$0.00 property settlement ony: \$0.00 atenance: \$0.00 property settlement: \$0.00 property settlement: \$0.00 property settlement: \$0.00 |
| 28. | Tax refunds or No Yes. Give s about you a and t Family suppor Examples: Past No Yes. Give s Other amount Examples: Unp Soc | specific information ut them, including whether already filed the returns the tax years | portion you own? Do not deduct secured claims or exemptions. eral: \$0.00 \$0.00 al: \$0.00 property settlement ony: \$0.00 atenance: \$0.00 property settlement: \$0.00 property settlement: \$0.00 property settlement: \$0.00 |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 17 of 71

| Deb | tor 1 Denise | | Franklin | Case number (if known) | |
|------|---|------------------------|---|--|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance po Examples: Health, disability | | alth savings account (HSA); credit, he | omeowner's, or renter's insurance | |
| | Yes. Name the insuran of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property to If you are the beneficiary of property because someoned No. | a living trust, expect | someone who has died proceeds from a life insurance policy | v, or are currently entitled to receive | |
| 33. | Claims against third part | | you have filed a lawsuit or made aurance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and unito set off claims No Yes. Describe | liquidated claims of | every nature, including counterc | laims of the debtor and rights | |
| 35. | Any financial assets you of No Yes. Describe | did not already list | | | |
| 36. | | - | m Part 4, including any entries fo | | \$900.00 |
| Part | - | | · · · | nterest In. List any real estate in Part | 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | egal or equitable in | terest in any business-related pro | С р р | current value of the ortion you own? To not deduct secured claims rexemptions |
| 38. | Accounts receivable or c | ommissions you alr | eady earned | 0 | - Oxomptions |
| | Yes. Describe | | | | |
| 39. | | | e, modems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, elect | ronic devices |
| | Yes. Describe | | | | |
| | | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 18 of 71

| Deb | tor 1 Denise | Franklin Case number (if known) | |
|-------|-----------------------------------|--|--|
| | First Name | Middle Name Last Name | |
| 40. | Machinery, fixtures, equipmen | it, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |
| 41. | Inventory | | |
| | □ No | | |
| | □ | e Shoes for Business | |
| | Tototype | CONTOCO NOT ENGINEESS | |
| | \$5000.00 | | |
| 42 | Interests in partnerships or joi | int ventures | |
| 72. | | int voltares | |
| | ✓ No | Name of entity: % of owners | hip: |
| | Yes. Give specific | , and or arrange | |
| | information about them | | |
| | ulom | | |
| | | | |
| | | | |
| 43. (| Customer lists, mailing lists, or | other compilations | |
| | ✓ No | | |
| | Yes. Do your lists include pe | ersonally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | | | |
| | No | | |
| | Yes. Describe | | |
| 44. | Any business-related property | you did not already list | |
| 77. | | you did not already list | |
| | ✓ No | | <u> </u> |
| | Yes. Give specific | | |
| | information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 45. A | dd the dollar value of all of you | r entries from Part 5, including any entries for pages you have attached | |
| | art 5. Write that number here | | \$5000.00 |
| | | | |
| Part | If you own or have an interest in | nd Commercial Fishing-Related Property You Own or Have an Intere | est in. |
| | • | | |
| 46. | Do you own or have any legal | or equitable interest in any farm- or commercial fishing-related property? | |
| | No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured claims |
| | _ | | or exemptions |
| 47. | Farm animals | | |
| | Examples: Livestock, poultry, far | m-raised fish | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 19 of 71

| Debt | or 1 | Denise First Name | | Franklin Last Name | Case number (if known) | |
|--------------|----------|---|--|------------------------|------------------------------|--------------|
| 48. | Cro | ps-either growing | | | | |
| | ✓ | No Yes. Describe | | | | |
| 49. | Far | m and fishing equipulation No Yes. Describe | oment, implements, machinery, fixtur | es, and tools of trade | | |
| 50 | Far | m and fishing supp | lies, chemicals, and feed | | | |
| | | No | , | | | |
| | | Yes. Describe | | | | |
| 51. | Any | | rcial fishing-related property you did | not already list | | |
| | | No Yes. Describe | | | | |
| | | | Il of your entries from Part 6, includin | | ou have attached | |
| Part 1 | 7. | Describe All Pro | perty You Own or Have an Intere | est in That You Did No | ot List ∆hove | |
| 53. | | | perty of any kind you did not already | | . = | |
| | | | s, country club membership | | | |
| | | No Yes. Give specific | | | | |
| | Ш | information | | | | |
| 54. A | dd tl | ne dollar value of a | ll of your entries from Part 7. Write th | at number here | | |
| | | | | | | |
| | | | | | | |
| Part 8 | 8: | List the Totals of | Each Part of this Form | | | |
| 55. F | Part | 1: Total real estate | , line 2 | | | |
| 56. p | art | 2 total vehicles, lin | e 5 | \$33114.00 | | |
| 57. P | art 3 | 3: Total personal ar | nd household items, line 15 | \$1300.00 | | |
| 58. P | art 4 | l: Total financial as | sets, line 36 | \$900.00 | | |
| 59. F | Part | 5: Total business-re | elated property, line 45 | \$5000.00 | | |
| 60. F | Part | 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. F | Part | 7: Total other prop | erty not listed, line 54 | | | |
| 62.1 | Γotal | personal property | Add lines 56 through 61 | \$40314.00 | Copy personal property total | + \$40314.00 |
| 63. T | otal | of all property on S | chedule A/B. Add line 55 + line 62 | | | \$40314.00 |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 20 of 71

| Debtor 1 | Denise | | Franklin | Case number (if known) | |
|----------|-------------|--------------|------------|------------------------|--|
| | First Names | Middle Noses | Look Moreo | | |

Schedule A/B: Property. Additional page

| Part 3: Describe Your Personal and Household Items | | | | | | |
|--|---|--|--|--|--|--|
| Do you own or have | ve any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | |
| 6.2. Household good | 6.2. Household goods and furnishings | | | | | |
| No Yes. Describe | (Storage) Desk/Clothes/Decorations | \$200.00 | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 21 of 71

| Debtor 1 | Denise | | Franklin | |
|---|------------|-------------|----------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | t 1: Identify the Property You Clair | n as Exempt | | | | | |
|-----|--|---|---|--|--|--|--|
| 1. | 3 · · · · · · · · · · · · · · · · · · · | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(2 | 2) | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: Jeep Grand Cherokee, 2016 | \$33,114.00 | \$0 100% of fair market value, up to any | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | |
| | Line from Schedule A/B: 03 | | applicable statutory limit | | | | |
| | Brief | 4 | | 735 ILCS 5/12-1001(b) | | | |
| | description: | \$400.00 | \$400.00 | | | | |
| | Bedroom Set (Mattress/Dresser/Desk) Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ | | | |
| 3. | ✓ No | ery 3 years after that for a | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 22 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$400.00 description: **✓** \$400.00 Cellular 100% of fair market value, up to any Phone/Television/Laptop/Tablet applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(a) Brief \$300.00 description: **V** \$300.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(d); 735 ILCS Brief \$5,000.00 5/12-1001(b) description: \$1,500.00; \$2,400.00 **Prototype Shoes for** 100% of fair market value, up to any **Business** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$450.00 description: \$450.00 Checking account, Ally 100% of fair market value, up to any Bank applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$150.00 description: \$150.00 Savings account, Ally 100% of fair market value, up to any Bank applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1006 \$300.00 description: \$300.00 401(k) or similar plan, 100% of fair market value, up to any 401k applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$200.00 description: \$200.00 (Storage)

Desk/Clothes/Decorations

Line from Schedule A/B:

100% of fair market value, up to any

applicable statutory limit

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 23 of 71

| | | Do | cument Page 23 of | 71 | | |
|-------------------------------|---|--|--|---|---|--------------------------------------|
| Fill in this in | nformation to identify your ca | ise: | | | | |
| Debtor 1 | Denise First Name | Middle Name | Franklin Last Name | | | |
| Debtor 2 (Spouse, if filir | | Middle Name | Last Name | | | |
| United Stat | es Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case numb | per | | (State) | | | |
| Officia | al Form 106D | | | _ | | Check if this is a amended filing |
| Sched | dule D: Credite | ors Who Hav | ve Claims Secur | ed by Prop | ertv | 12/1 |
| 1. Do ar | case number (if known). The creditors have claims so the claims all of the information the claims. | nit this form to the court v | ty? vith your other schedules. You ha | ve nothing else to repo | ort on this form. | |
| 2. List sepa | art 2. As much as possible, list | nan one creditor has a part | ured claim, list the creditor icular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Credi 200 N | Y FINANCIAL itor's Name PRENAISSANCE CTR Jumber Street ROIT MI 48243 State ZIP Code | 2016 Jeep Grand Cherc As of the date you file, Contingent Unliquidated | that secures the claim: okee the claim is: Check all that apply. | <u>\$40,585.00</u> | \$33,114.00 | \$7,471.00 |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Disputed Nature of lien. Check a An agreement you r car loan) | ıll that apply. made (such as mortgage or secured | | | |
| | At least one of the debtors and another | Statutory lien (such Judgment lien from | as tax lien, mechanic's lien) a lawsuit | | | |
| Date | Check if this claim relates to a community debt e debt was 8/1/2016 erred | Other (including a right Last 4 digits of accour | , | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$40,585.00

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main

| | | Do | ocument Page 24 of 71 | | | |
|---|--|---|---|----------------------------------|--------------------------------|----------------------------|
| Fill in this infor | rmation to identify your case: | | | | | |
| Debtor 1 | Denise First Name M | liddle Name | Franklin Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name M | liddle Name | Last Name | | | |
| United States I | Bankruptcy Court for the: Northern | | District of Illinois (State) | | | |
| Case number (If known) | | | —————————————————————————————————————— | | | |
| Official F | orm 106E/F | | | Chec | k if this is an | amended filing |
| Sched | ule E/F: Creditor | s Who | Have Unsecured Claim | S | | 12/15 |
| Form 106A/B) claims that are the entries in known). | and on Schedule G: Executory Con e listed in Schedule D: Creditors Wi | ntracts and Un ho Hold Claim ontinuation Pa | t could result in a claim. Also list executory contra expired Leases (Official Form 106G). Do not includ is Secured by Property. If more space is needed, co age to this page. On the top of any additional page | e any creditors ppy the Part you | with partial uneed, fill it | lly secured out, number |
| ☐ No. ✓ Yes. | | | you? more than one priority unsecured claim, list the creditor | sengrately for ea | ch claim. For | ceach claim |
| listed, ide As much Continua | entify what type of claim it is. If a claim as possible, list the claims in alphabet tion Page of Part 1. If more than one o | n has both prior tical order accor creditor holds a | ity and nonpriority amounts, list that claim here and short rding to the creditor's name. If you have more than two particular claim, list the other creditors in Part 3. for this form in the instruction booklet.) | ow both priority | and nonprior | ity amounts. |
| | • | | · | Total claim | Priority amount | Nonpriority amount |
| 2.1 IRS 1 Priority PO Box Number | | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. | \$3,500.00 | \$3,500.00 | \$0.00 |
| | | 01 Code | Contingent Unliquidated Disputed | | | |
| | otor 2 only | | Type of PRIORITY unsecured claim: | | | |
| | otor 1 and Debtor 2 only | | Domestic support obligations ✓ Taxes and certain other debts you owe the | | | |
| At I | east one of the debtors and another | | government | | | |
| | eck if this claim relates to a comm | nunity debt | Claims for death or personal injury while you were intoxicated | | | |
| is the d | laim subject to offset? | | Other Specify | | | |

✓ No Yes Other. Specify _____

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 25 of 71

| Debte | or 1 | Denise First Name Middle Name | Franklin Last Name | Case number (if known) | |
|--------|------------------|--|-----------------------|---|-------------------|
| Part | 2. | List All of Your NONPRIORITY Unsecured C | | , | |
| 3. I | Do a | ny creditors have nonpriority unsecured claims as No. You have nothing to report in this part. Submit Yes. | gainst you? | ne court with your other schedules. | |
| l I | unse If mo | ecured claim, list the creditor separately for each claim. | For each claim | er of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill out | cluded in Part 1. |
| | | | | | Total claim |
| 4.1 | | MCA conpriority Creditor's Name | | Last 4 digits of account number 3511 | \$233.00 |
| | | 269 S SAW MILL RIVER ROAD | | When was the debt incurred? 10/1/2016 | |
| | Nu | umber Street | | As of the date you file, the claim is: Check all that apply. | |
| | _ | | | Contingent | |
| | | MSFORD New York 10523 | <u></u> | Unliquidated | |
| | Cit | ty State Zip Co- ho incurred the debt? Check one. | ae | Disputed | |
| | <u></u> | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | F | Debtor 2 only | | Student loans | |
| | F | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | F | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | F | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is | the claim subject to offset? | | Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | ✓ | No | | Other. Specify Onighnal Chediton. Medical | |
| | | Yes | | | |
| 4.2 | _ | ACA | | Last 4 digits of account number 3814 | \$50.00 |
| | | onpriority Creditor's Name 269 S SAW MILL RIVER ROAD | | When was the debt incurred? 10/1/2016 | |
| | Νu | umber Street | | As of the date you file, the claim is: Check all that apply. | |
| | _ | | | Contingent | |
| | | MSFORD New York 10523 | | Unliquidated | |
| | Cit | ty State Zip Co- ho incurred the debt? Check one. | de | Disputed | |
| | ✓ | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | Student loans | |
| | | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is | the claim subject to offset? | | Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL | |
| | ✓ | No | | Other. openity OHIGHNAL ONLDITION. MEDICAL | |
| | | Yes | | | |
| 4.3 | _ | MEX onpriority Creditor's Name | | Last 4 digits of account number0963 | \$934.00 |
| | 20 | 00 Vesey Street | | When was the debt incurred? 6/1/2016 | |
| | Nu | umber Street | | As of the date you file, the claim is: Check all that apply. | |
| | _ | | | Contingent | |
| | <u>Ne</u> Cit | ew York New York 10080 ty State Zip Co | | Unliquidated | |
| | | ho incurred the debt? Check one. | | Disputed | |
| | ✓ | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | Student loans | |
| | | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls | the claim subject to offset? | | Other. Specify CreditCard | |
| | ∠ | No Voc | | | |
| | - 1 | Yes | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 26 of 71

Debtor 1 Denise Franklin Case number (if known)
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Part 2 | art 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | | |
|--------|--|---|------------|--|--|--|--|--|
| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | | | | |
| 4.4 | BBY/CBNA | - Last 4 digits of account number 3522 | \$466.00 | | | | | |
| | Nonpriority Creditor's Name PO BOX 6497 | When was the debt incurred? 4/1/2014 | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | | Contingent | | | | | | |
| | SIOUX FALLS South Dakota 57117 City State Zip Code | Unliquidated | | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| | Debtor 2 only | Student loans | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | | | | | | |
| | Check if this claim relates to a community debt Is the claim subject to offset? | debts Other. Specify CreditCard | | | | | | |
| | No | <u> </u> | | | | | | |
| | Yes | | | | | | | |
| 4.5 | CAPITAL ONE BANK USA N | Last Adrests of a constant | \$5,095.00 | | | | | |
| 1.0 | Nonpriority Creditor's Name | - Last 4 digits of account number When was the debt incurred? 4/1/2012 | Ψ0,000.00 | | | | | |
| | PO BOX 85520 Number Street | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | RICHMOND Virginia 23285 | Contingent | | | | | | |
| | City State Zip Code | - Unliquidated | | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| | Debtor 2 only | Student loans | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Is the claim subject to offset? | Other. Specify CreditCard | | | | | | |
| | <u>✓</u> No | | | | | | | |
| | Yes | | | | | | | |
| 4.6 | Chase Bank Nonpriority Creditor's Name | - Last 4 digits of account number | \$1,300.00 | | | | | |
| | P.O. Box 659732 | When was the debt incurred?n/a | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | - | - Contingent | | | | | | |
| | San Antonio Texas 78265 | Unliquidated | | | | | | |
| | City State Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| | Debtor 2 only | Student loans | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | | | |
| | Check if this claim relates to a community debt | debts Other. Specify Overdraft Fees | | | | | | |
| | Is the claim subject to offset? | Overdian Fees | | | | | | |
| | ✓ No | | | | | | | |
| | Yes | | | | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 27 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 CHASE CARD \$4,101.00 Last 4 digits of account number Nonpriority Creditor's Name 12/1/2015 When was the debt incurred? PO BOX 15298 Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON Delaware 19850 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes 4.8 CITI \$4,389.00 Last 4 digits of account number 7138 Nonpriority Creditor's Name P.O. BOX 9001037 When was the debt incurred? 4/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 40290 Louisville Kentucky Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ CreditCard Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.9 \$35,169.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 6/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

debts Other. Specify

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 28 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.10 \$15,099.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF ED/NAVIENT \$14,195.00 Last 4 digits of account number 0916 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.12 \$13,221.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 8/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

Yes

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 29 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.13 \$7,337.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 5/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF ED/NAVIENT \$6,884.00 Last 4 digits of account number 0513 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 5/1/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes DISCOVER FIN SVCS LLC 4.15 \$19,152.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 15316 When was the debt incurred? 11/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19850 Delaware Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? No

Yes

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 30 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 LENDING CLUB CORP \$6,811.00 Last 4 digits of account number Nonpriority Creditor's Name 71 STEVENSON ST STE 300 When was the debt incurred? 6/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent SAN FRANCISCO California 94105 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ 036 InstallmentLoan Is the claim subject to offset? **✓** No Yes 4.17 MyLoanSite.com \$700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 50 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 57339 South Dakota Fort Thompson City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ payday loan Is the claim subject to offset? **✓** No Yes SYNCB/AMAZON 4.18 \$3,306.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965015 When was the debt incurred? 2/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify __ CreditCard Is the claim subject to offset? **✓** No

Yes

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 31 of 71

| Debtor 1 | Denise First Name | Middle Name | Franklin Last Name | Case number (if known) | |
|------------|--|-----------------------|-----------------------|--|-------------|
| Part 2: | Your NONPRIORITY Uns | ecured Claims - Cor | ntinuation Pa | ge | |
| , | After listing any entries on this | s page, number them b | eginning with | 4.5, followed by 4.6, and so forth. | Total claim |
| [<u>.</u> | JS Bank Nonpriority Creditor's Name Po Box 5229 Number Street C/O Bankruptcy Department | | v | When was the debt incurred? 7/1/2013 Its of the date you file, the claim is: Check all that apply. | \$4,873.00 |
| | Cincinnati City State Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this claim relates as the claim subject to offset? No Yes | one. nd another | [| Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 32 of 71

Debtor 1 Denise Franklin Case number (if known)

| First Na | me Middle Name Last Name | | | |
|-----------------------------|--|---------|----------------------------|---------|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | atistical reporting purpos | es only |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | | \$3,500.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$3,500.00 | |
| | | | Total claims | |
| | | | Total Claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$91,905.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$51,410.00 | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$143,315.00 | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 33 of 71

| Fill in this information to identify your case: | | | | | | | | | |
|---|---------------------------|-------------|------------------------------|---|--|--|--|--|--|
| Debtor 1 | Denise | | Franklin | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | ļ | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | | | |
| Case number | | | (= 1) | | | | | | |
| (If known) | • | | | | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 34 of 71

| | | D | cument rage | . 34 01 71 |
|-------------------------|--------------------------------|---|------------------------------|--|
| Fill in thi | s information to identify you | ur case: | | |
| Debtor 1 | Denise | | Franklin | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if | | | | |
| (Spouse, II | filing) First Name | Middle Name | Last Name | |
| United S | tates Bankruptcy Court for the | ne: Northern | District of Illinois | |
| Case nu | mber | | (State) | |
| (If known) | | | | |
| | | | | Check if this is an |
| O.C. | | | | amended filing |
| Offic | ial Form 106F | 1 | | |
| Saha | dule H: Your C | _ odobtoro | | 40/45 |
| Sche | dule n: Your C | odebiors | | 12/15 |
| known). <i>i</i> | Answer every question. | . Attach the Additional Page | | p of any Additional Pages, write your name and case number (if codebtor.) |
| | hin the last 8 years, have y | you lived in a community pro Mexico, Puerto Rico, Texas, W | | (Community property states and territories include Arizona, California, .) |
| | Yes. Did your spouse, for | rmer spouse, or legal equiva | alent live with you at the t | ime? |
| | ✓ No | | | |
| | Yes. In which comm | unity state or territory did yo | u live? | Fill in the name and current address of that person. |
| | | | | |
| | Name of your spous | se, former spouse, or legal equ | ivalent | |
| | Number Street | | | |
| | City | State | Zip Coo | de |
| | | | · | |
| 3. In C | column 1, list all of your co | debtors. Do not include you | r spouse as a codebtor i | f your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 35 of 71

| | | | oamone | . age ce | | | |
|---|--|--|------------------------|------------------|----------------|---------------------------|--------------------------|
| Fill in this | information to identify | your case: | | | | | |
| Debtor 1 | Denise | | Frankl | in | | | |
| | First Name | Middle Name | Last N | ame | — Che | eck if this is: | |
| Debtor 2 | iling) First Name | Middle Name | Last N | lama | — I п | An amended filing | |
| | | | | | | A supplement showing p | nost-netition chanter 13 |
| United Sta the: Case numl | ites Bankruptcy Court for | Northern | District of Illi (S | inois State) | | expenses as of the follow | |
| (If known) | Dei | | | | _ | MM / DD / YYYY | |
| Officia | al Form 106I | | | | | | |
| Sched | lule I: Your In | come | | | | | 12/15 |
| information spouse. If number (in | on about your spouse. I | | d your spous | se is not filing | g with you, do | not include informat | ion about your |
| | your employment nation. | | Debtor 1 | | | Debtor 2 | |
| | | Employment status | Emplo | ved | | Employed | |
| | have more than one job, a separate page with | | | mployed | | Not Employed | |
| inform employ | ation about additional yers. | Occupation | | | | | |
| | e part time, seasonal, or nployed work. | Employer's name | Anixter Inc | | | | |
| | eation may include student | Employer's address | 2301 Patri | iot Boulevard | | | |
| | nemaker, if it applies. | | Number St | reet | | Number Street | |
| | | | | | | _ | |
| | | | Glenview | Illinois | 60026 | _ | |
| | | | City | State | Zip Code | City | State Zip Code |
| | | How long employed there? | | | | | |
| Part 2: | Give Details About N | Monthly Income | | | | | |
| spouse u | nless you are separated. | the date you file this form e more than one employer, et to this form. | | information for | • | · | , |
| | | ary, and commissions (before, calculate what the monthly | | 2. | \$5,628.13 | non-filing spouse | - |
| | mate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| | culate gross income. Add li | | | 4. | \$5,628.13 | | <u> </u> |
| | | | | 1 | | 1- | _ |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 36 of 71

| Debto | | ranklin | Case number | (if | |
|----------------|---|---------------------|---------------------------|-----------------------------------|-------------------------|
| | First Name Middle Name L | _ast Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Cop | y line 4 here | → 4. | \$5,628.13 | g operate | |
| - | all payroll deductions: | | | | |
| | Tax, Medicare, and Social Security deductions | 5a. | \$1,332.65 | | |
| 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| | Voluntary contributions for retirement plans | 5c. | \$168.74 | | |
| | Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| | Insurance | 5e. | \$3.14 | | |
| | Domestic support obligations | 5f. | \$0.00 | | |
| | Union dues | 5g. | \$0.00 | | |
| ŭ | Other deductions. Specify: | | \$0.00 + | | |
| | the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f | - | \$1,504.53 | | |
| 7. Cal | culate total monthly take-home pay. Subtract line 6 from line | 4. 7. | \$4,123.60 | | |
| 8. List | all other income regularly received: | | | | |
| 8a. | Net income from rental property and from operating a business, profession, or farm | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$0.00 | | |
| 8b. | Interest and dividends | 8b. | \$0.00 | | |
| 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | а | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | | |
| 8d. | Unemployment compensation | 8d. | \$0.00 | | |
| 8e. | Social Security | 8e. | \$0.00 | | |
| | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | | \$0.00 | | |
| 9.0 | Pension or retirement income | 8f. | \$0.00 \$0.00 | | |
| • | | 8g. 8h. + | \$0.00 + | | |
| | Other monthly income. Specify: | | | | |
| 9. Aud | l all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | 9. | \$0.00 | | |
| | culate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. Douse | \$4,123.60 + | = | \$4,123.60 |
| Inc frie | ate all other regular contributions to the expenses that you lude contributions from an unmarried partner, members of your nds or relatives. not include any amounts already included in lines 2-10 or amounts. | household, your d | ependents, your roomm | | |
| | ecify: | and that are not av | anabic to pay experises i | 11 | + \$0.00 |
| | oury. | | | | Ψ0.00 |
| | Id the amount in the last column of line 10 to the amount in the that amount on the Summary of Schedules and Statistical Sun | | | , | \$4,123.60 |
| | | | | | Combined monthly income |
| 13. D o | you expect an increase or decrease within the year after yolo. | you file this form? | | | |
| | | | | | |
| L | Yes. Explain: | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 37 of 71

| | | Docu | ment Page 37 of 71 | L | |
|--|---|--|--|-------------------|---|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 Debtor 2 (Spouse, if filing) | Denise First Name | Middle Name | Franklin Last Name | Check if this is: | ng |
| | First Name sankruptcy Court for the | Middle Name : Northern [| Last Name District of Illinois (State) | A supplement s | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | | MM / DD / YYY | / |
| | Form 106J e J: Your E xp | nansas | | | 12/15 |
| information. If it (if known). Answer 1: Description 1. Is this a join | more space is needed wer every question. cribe Your Househo nt case? | , attach another sheet to this | re filing together, both are equall form. On the top of any additiona | | |
| | o to line 2 Des Debtor 2 live in a s No Yes. Debtor 2 must f | | nses for Separate Household of Debt | for 2. | |
| 2. Do you have Do not list D Debtor 2. | ebtor 1 and | No Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age | Does dependent live with you? No. Yes. |
| | d your | No ⁄es | | | |
| Part 2: Estir | nate Your Ongoing | Monthly Expenses | | | |
| _ | f a date after the ban | | rou are using this form as a supploplemental Schedule J, check the | • | - |
| Include expen | ses paid for with non- | cash government assistance | if you know the value of | | |
| such assistan | ce and have included | it on Schedule I: Your Income | (Official Form B 106I.) | | Your expenses |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 38 of 71

 Debtor 1 First Name
 Denise Franklin
 Case number (if known)

 Last Name
 Last Name

| First Name | Mildule Name Last Name | | |
|--|--|------------|---------------------------------------|
| | | | Your expenses |
| 5. Additional mortgage payme | nts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | as a second of the second of t | 6a. | \$0.00 |
| 6b. Water, sewer, garbage co | llection | 6b. | \$80.00 |
| 6c. Telephone, cell phone, In | ternet, satellite, and cable services | 6c. | \$200.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | plies | 7. | \$651.00 |
| 8. Childcare and children's ed | ucation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry c | leaning | 9. | \$225.00 |
| 10. Personal care products an | d services | 10. | \$225.00 |
| 11. Medical and dental expens | ses | 11. | \$75.00 |
| 12. Transportation. Include gas Do not include car payments | | 12. | \$350.00 |
| 13. Entertainment, clubs, recr | eation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance ded | ucted from your pay or included in lines 4 or 20. | | · · · · · · · · · · · · · · · · · · · |
| 15a. Life insurance | | 15a | \$130.00 |
| 15b. Health insurance | | 15b | \$15.00 |
| 15c. Vehicle insurance | | 15c | \$130.00 |
| 15d. Other insurance. Specify | r <u>. </u> | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | ents: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$657.00 |
| 17b. Car payments for Vehicle | e 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| | | 17d | \$0.00 |
| | maintenance, and support that you did not report as deducted from | | \$0.00 |
| | lle I, Your Income (Official Form 106I). | 18. | |
| 19.Other payments you make Specify: | to support others who do not live with you. | 40 | |
| | on wat included in lines 4 or 5 of this form or on Cabadula I. Varia Income | 19. | \$0.00 |
| 20a. Mortgages on other pro | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 20a | \$0.00 |
| 20b. Real estate taxes. | , | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | 200 20c | \$0.00 |
| 20d. Maintenance, repair, and | | 20d | \$0.00 |
| 20e. Homeowner's association | | 20a 20e | \$0.00 |
| | | 206 | <u> </u> |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 39 of 71

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 40 of 71

| Fill in this infor | mation to identify your c | ase: | | | | |
|------------------------|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | Denise | | Franklin | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case number (If known) | | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ☑ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Denise Franklin | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 2/14/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 41 of 71

| Fill in this in | formation to identify your | case: | | | | | |
|--------------------|--|----------------------|---------------------------|-----------------|------------|----------|----------------------|
| Debtor 1 | Denise | | Franklin | | _ | | |
| Debtor 2 | First Name | Middle N | lame Last Nam | е | | | |
| (Spouse, if filing | First Name | Middle N | lame Last Nam | е | - | | |
| United State | s Bankruptcy Court for the: | Northern | District of Illino | | | | |
| Case numbe | er | | (Stat | e) | | | |
| (If known) | | | | | | | Check if this is a |
| Officia | l Form 107 | | | | | | amended filing |
| Statem | ent of Financia | al Δffaire f | or Individuals | Filina fo | r Bankru | ntcv | 12/1 |
| | olete and accurate as po | | | | | | |
| information | n. If more space is need | ed, attach a sepa | | | | | |
| number (if i | known). Answer every c | juestion. | | | | | |
| Part 1: Gi | ve Details About Your | Marital Status | and Where You Lived | Before | | | |
| 1. What | is your current marital st | atus? | | | | | |
| | Married | | | | | | |
| | lot married | | | | | | |
| 2. Durin | g the last 3 years, have y | ou lived anywhere | other than where you li | e now? | | | |
| | | ou liveu allywilere | other than where you in | e now: | | | |
| | lo ′es. List all of the places y | ou lived in the last | 3 years. Do not include y | where vou live | now | | |
| ш. | co. List all of the places y | | o yours. Do not moiddo t | viloro you livo | now. | | |
| | Debtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | | | | | | | _ |
| N | lumber Street | | From | Number Str | eet | | From |
| _ | | | То | | | | To |
| <u> </u> | Dity State | Zip Code | | City | State | Zip Code | |
| | • | | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | |
| Ī | lumber Street | _ | From | Number Str | reet | | From |
| _ | | _ | To | | | | To |
| _ | Dity State | Zip Code | | City | State | Zip Code | |
| | , | p ==== | | , | Sidio | p 3000 | |
| | the last 8 years, did you o <i>itories</i> include Arizona, Calif | | | | | | |
| ✓ No |) | | | | | | |
| | s. Make sure you fill out S | Schedule H: Your (| Codebtors (Official Form | 106H). | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 42 of 71

Franklin

Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$7795.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$14278.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$38000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) From January 1 of current year until the date you filed for bankruptcy: \$6,840.00 Unemployment For last calendar year: 401k Disbursement \$13,198.00 (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 43 of 71

Franklin Debtor 1 Denise __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 44 of 71

| or 1 | Denise | | | Fra | anklin | Case number | (if known) |
|--------------------|--|--|--|--|---|--|---|
| | First Name | | Middle Name | La: | st Name | | |
| nsi corp age | ders include your porations of whic | relatives; and the relatives; are relatives; and the relatives; and the relatives; and the relatives; are relatives; and the relatives; and the relatives; are relatives; and the relatives; and the relatives; and the relatives; are relatives; and the relatives; are relatives; and the relatives; are relatives; are relatives; are relatives; and the relatives; are relatives; a | any general partners an officer, director, ness you operate as | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | Dates of | Total amount | Amount you | Reason for this payment |
| | | | | payment | paid | still owe | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | | aranteed or cosigne | · | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | <u> </u> | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | <u> </u> | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 45 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 46 of 71

| Deb | | Denise First Name | | Middle Name | Franklin Last Name | Case number (if known) | | |
|------|----------|--|---------------------|---------------|-----------------------------|----------------------------------|--------------------------|--------------------|
| 11. | | No | make a pay | | | oank or financial institution, s | set off any amou | nts from your |
| | Ш | Yes. Fill in the de | talis. | | Describe the action th | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | | |
| | | Number Street | | | | | | |
| | | | | | Last 4 digits of account | number: XXXX- | | |
| | | City | State | Zip Code | | | | |
| 12. | | hin 1 year before y ointed receiver, a | | | | possession of an assignee for | the benefit of c | reditors, a court- |
| | ✓ | No Yes | | | | | | |
| Part | 5: | List Certain Gift | ts and Cont | tributions | | | | |
| 13. | Wit | thin 2 years before No Yes. Fill in the de | | | you give any gifts with a t | otal value of more than \$600 | per person? | |
| | | Gifts with a total per person | value of mo | re than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom | You Gave the | Gift | | | | |
| | | | Tou Gave the | | | | | |
| | | Number Street | | | | | | |
| | | City Person's relationsh | State nip to you | Zip Code | | | | |
| | | Person to Whom | You Gave the | Gift | | | | |
| | | Number Street | | | | | | |
| | | City Person's relationsh | State | Zip Code | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 47 of 71

| Debt | or 1 | Denise | Franklin | Case number (if known) | | |
|------|-------------------|--|---|--------------------------------|---|------------------------|
| | | First Name Middle Name | Last Name | | | |
| 14. | Wit | hin 2 years before you filed for bankruptcy, o | lid you give any gifts or contribut | ions with a total value of m | ore than \$600 | to any charity? |
| | | | na you give any give or continuati | iono with a total value of m | oro man quo | to any onanty: |
| | 뇓 | No Yes. Fill in the details for each gift or contribution | ution | | | |
| | Ш | - | | 1.1 | 0.1. | W.L. |
| | | Gifts or contributions to charities that total more than \$600 | Describe what you contrib | | Date you contributed | Value |
| | | | | | | |
| | | Charity's Name | - | | | |
| | | | <u></u> | | | |
| | | | | | | |
| | | Number Street | _ | | | |
| | | City State Zip Code | | | | |
| | | Oity State Zip Code | | | | |
| Part | 6: | List Certain Losses | | | | |
| | | | | | | |
| 15. | | hin 1 year before you filed for bankruptcy or nbling? | since you filed for bankruptcy, di | d you lose anything becaus | e of theft, fire, | other disaster, or |
| | | | | | | |
| | $ \underline{V} $ | No | | | | |
| | Ш | Yes. Fill in the details. | | | | |
| | | Describe the property you lost and how the loss occurred | Describe any insurance conclude the amount that ins | | Date of your loss | Value of property lost |
| | | now the loss occurred | pending insurance claims o | | 1033 | 1031 |
| | | | A/B: Property. | | | |
| | | | | | | |
| Part | 7. | List Certain Payments or Transfers | | | | |
| 16. | Wit | hin 1 year before you filed for bankruptcy, di | d you or anyone else acting on y | our behalf pay or transfer a | ny property to a | anyone you consulted |
| 16. | abo | out seeking bankruptcy or preparing a bankru ude any attorneys, bankruptcy petition preparers No | uptcy petition? | | | anyone you consulted |
| 16. | abo | out seeking bankruptcy or preparing a bankru ude any attorneys, bankruptcy petition preparers | uptcy petition? , or credit counseling agencies for s | ervices required in your bankr | uptcy. | |
| 16. | abo | out seeking bankruptcy or preparing a bankru ude any attorneys, bankruptcy petition preparers No | uptcy petition? | ervices required in your bankr | uptcy. Date payment or transfer | Amount of payment |
| 16. | abo | out seeking bankruptcy or preparing a bankru ude any attorneys, bankruptcy petition preparers No Yes. Fill in the details. | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | out seeking bankruptcy or preparing a bankru ude any attorneys, bankruptcy petition preparers No | uptcy petition? , or credit counseling agencies for s Description and value of a | ervices required in your bankr | uptcy. Date payment or transfer | Amount of |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | out seeking bankruptcy or preparing a bankrupted any attorneys, bankruptcy petition preparers No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |
| 16. | abo | Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid Number Street | uptcy petition? , or credit counseling agencies for s Description and value of a transferred | ervices required in your bankr | uptcy. Date payment or transfer was made | Amount of payment |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 48 of 71

| Debto | | Denise | | Franklin | Case number (if known |) <u></u> | |
|-------|---------------------|---|--|---|-----------------------------|-------------------------------------|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| ļ | help | o you deal with your credit not include any payment or t | ors or to make payme | | our behalf pay or transfer | any property to a | nyone who promised to |
| | ✓ | No Yes. Fill in the details. | | | | | |
| • | | | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| † | the Inclu | ordinary course of your bu | siness or financial aff nd transfers made as se | ecurity (such as the granting of a | | • | |
| 1 | | | | Description and value of a property transferred | | y property or eceived or debts p | Date transfer was made |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Trans | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| ļ | ben | nin 10 years before you file eficiary? ese are often called asset-pro No | | you transfer any property to | a self-settled trust or sim | nilar device of whi | ch you are a |
| İ | | Yes. Fill in the details. | | Description and value of | the property transferred | | Date transfer was made |
| | | Name of trust | | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 49 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Chase Bank Checking XXXX-0000 01/2017 \$ 0.00 Person Who Was Paid Savings P.O. Box 659732 Number Street Money market Brokerage San Antonio 78265 Texas Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Life Storage Clothes/Shoes/Desk/Decorations/T No Name of Storage Facility Name 3245 W 30th St Number Street Number Street City State Zip Code Chicago Illinois 60623 State Zip Code City

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 50 of 71

Franklin Debtor 1 Denise Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 51 of 71

| Deb | | Denise | | Calalla Nama | | anklin | Ca | ase number <i>(i</i> | f known) | |
|------|----------|-----------------------------------|-------------------|-------------------|---------------|-----------------|--------------------|----------------------|--|-----------------|
| | | First Name | | Middle Name | La | st Name | | | | |
| 26. | Hav | e you been a part | y in any judici | al or administ | rative proce | eding under | any environme | ental law? In | nclude settlements and ord | ers. |
| | V | No | | | | | | | | |
| | Ħ | Yes. Fill in the det | ails. | | | | | | | |
| | | | | | Court or ag | ency | | Nature | of the case | Status of the |
| | | Case title | | | | | | | | case |
| | | | | | | | | | | Pending |
| | | | | | Court Name | | | | | On appeal |
| | | Case number | | | NumberStre | et | | • | | |
| | | | | | City | State | Zip Code | | | Concluded |
| | | | | | | | • | | | |
| Pari | 11: | Give Details Al | out Your B | usiness or Co | onnections | to Any Bu | siness | | | |
| 27. | Witl | nin 4 years before | you filed for b | ankruptcy, die | d you own a | business or | have any of the | e following o | connections to any busines | s? |
| | | - | - | | • | | - | - | • | |
| | | | | - | | | r activity, either | | part-time | |
| | | | | lity company (I | LC) or limite | ed liability pa | artnership (LLP) |) | | |
| | | A partner in a | - | | | | | | | |
| | | | | naging executiv | - | | | | | |
| | | An owner of | at least 5% of | the voting or e | equity securi | ties of a corp | poration | | | |
| | П | No. None of the a | bove applies | . Go to Part 12 | | | | | | |
| | | Yes. Check all tha | at apply abov | e and fill in the | details belo | w for each b | ousiness. | | | |
| | | | | | Desci | ribe the natu | ure of the busin | iess | Employer Identification | number Do not |
| | | 0.1.1.1 | | | | | | | include Social Security r | number or ITIN. |
| | | Sole Interpretation Business Name | | | Onlir | ne Shoe Sales | S | | EIN:xx-xxx | |
| | | 7803 S King Dr | | | | | | | | |
| | | Number Street | | | | | | | Dates business existed | |
| | | Chicago | Illinois State | 60619 | Name | e of account | ant or bookkee | eper | Dates business existed | |
| | | City | State | Zip Code | | | | | From 05/2016 To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Desci | ribe the natu | ure of the busin | iess | Employer Identification include Social Security | |
| | | | | | | | | | • | iumber of Trin. |
| | | Business Name | | | _ | | | | EIN: | |
| | | Newshare Observe | | | _ | | | | Dates business existed | |
| | | Number Street | | | Name | of account | ant or bookkee | per | Dates business existed | |
| | | City | State | Zip Code | _ | | | | From To | |
| | | • | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | Desci | ribe the natu | ure of the busin | iess | Employer Identification include Social Security in | |
| | | | | | | | | | EIN: | |
| | | Business Name | | | _ | | | | LIIV. | |
| | | Number Street | | | _ | | | | Dates business existed | |
| | | Namber Street | | | Name | of account | ant or bookkee | per | _ atoo buomood onoteu | |
| | | City | State | Zip Code | _ | | | | From To | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 52 of 71

| Debto | or 1 Denise | Franklin | Case number (if known) |
|----------|--|-----------------------------|---|
| | First Name Middle N | lame Last Name | |
| | Within 2 years before you filed for bankrucreditors, or other parties. No Yes. Fill in the details below. | iptcy, did you give a finan | cial statement to anyone about your business? Include all financial institutions, |
| | | Date issu | ed |
| | | Date 1930 | eu |
| | Name | MM/DD/YY | Y |
| | | | |
| | Number Street | | |
| | | | |
| | City State Zi | p Code | |
| Part | 12: Sign Below | | |
| tr | rue and correct. I understand that making | g a false statement, conce | any attachments, and I declare under penalty of perjury that the answers are saling property, or obtaining money or property by fraud in connection with int for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Debtor 1 | | Signature of Debtor 2 |
| | | | Date |
| | Date 2/14/2017 | | Duito |
| Di | oid vou attach additional pages to Your S | atement of Financial Affa | irs for Individuals Filing for Bankruptcy (Official Form 107)? |
| | ✓ No Yes | | |
| Di | Did you pay or agree to pay someone who | is not an attorney to help | you fill out bankruptcy forms? |
| | _ | | • |
| <u> </u> | No | | |
| | Yes. Name of person | | Attach the <i>Bankruptcy Petition Preparer's Notice,</i> Declaration, and Signature (Official Form 119). |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 53 of 71

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Denise Franklin | Case No. | |
|-------|--|--|-----------------------------|
| = | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSAT | ION OF ATTORNEY F | OR DEBTOR |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of rendered or to be rendered on behalf of the debtor(s) in conte | the petition in bankruptcy, or agreed to | be paid to me, for services |
| | For legal services, I have agreed to accept | | \$4,000.0 |
| | Prior to the filing of this statement I have received | | \$350.0 |
| | Balance Due | | \$3,650.0 |
| 2 | . The source of the compensation paid to me was: | | |
| | Debtor Other (spe | cify) | |
| 3 | . The source of the compensation paid to me is: | | |
| | Debtor Other (spe | cify) | |
| 4 | . I have not agreed to share the above-disclosed compens members and associates of my law firm. | ation with any other person unless the | ey are |
| | I have agreed to share the above-disclosed compensation members or associates of my law firm. A copy of the agree the people sharing in the compensation, is attached. | | |
| 5 | In return for the above-disclosed fee, I have agreed to render a. Analysis of the debtor's financial situation, and render bankruptcy; | | |
| | b. Preparation and filing of any petition, schedules, stat | ements of affairs and plan which may b | pe required; |
| | c. Representation of the debtor at the meeting of creditor | ors and confirmation hearing, and any | adjourned hearings thereof; |
| | d. Representation of the debtor in adversary proceeding | s and other contested bankruptcy mat | ters; |
| 6 | . By agreement with the debtor(s), the above-disclosed fee doc | es not include the following services: | |
| | | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 54 of 71

B 203 (12/94)

| CERTIFICATION | | |
|--|-----------------------|--|
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. | | |
| 2/14/2017 /s/ Jason Diaz | | |
| Date | Signature of Attorney | |
| | Semrad Law Firm | |
| | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|------|-------|--------------------|
| \$75 | | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 59 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Franklin, Denise | Case No | |
|-----------------|--|--|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | TRIX |
| Tł knowledge | ne above named Debtors hereby verifye. | y that the attached list of creditors is t | rue and correct to the best of their |
| Date: | 2/14/2017 | /s/ Franklin, Der Franklin, Denise Signature of De |) |

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI, 48243

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

DISCOVER FIN SVCS LLC PO BOX 15316 WILMINGTON, DE, 19850

LENDING CLUB CORP 71 STEVENSON ST STE 300 SAN FRANCISCO, CA, 94105

CAPITAL ONE BANK USA N c/o Amanda Matchett PO Box 71083 Charlotte, NC, 28272

US Bank Po Box 5229 C/O Bankruptcy Department Cincinnati, OH, 45201

CITI P.O. BOX 9001037 Louisville, KY, 40290

CHASE CARD PO BOX 15298 WILMINGTON, DE, 19850

SYNCB/AMAZON PO BOX 965015 ORLANDO, FL, 32896

AMEX 200 Vesey Street New York, NY, 10080

BBY/CBNA PO BOX 6497 SIOUX FALLS, SD, 57117

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 61 of 71

AMCA Po Box 1235 Elmsford, NY, 10523

Chase Bank 340 S. Cleveland Bldg 370 OH1-1073 Westerville, OH, 43081

MyLoanSite.com PO Box 50 Fort Thompson, SD, 57339

IRS 1 PO Box 7346 Philadelphia, PA, 19101

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 64 of 71

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 2/13/2017 | | |
|---------|--------------|------------------------|--|
| Signed | : | | |
| /s/ Den | ise Franklin | | |
| | 1 am | /s/ Jason Diaz | |
| Debtor | (s) | Attorney for Debtor(s) | |

Do not sign if the fee amounts at top of this page are blank.

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 67 of 71

| Debtor 1 Denise First Name | Middle Name | Franklin Last Name | Case number (if known) | |
|---|---|--|---|---|
| | estions for Reporting Purpose | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts y | y consumer debts? Cal primarily for a perso by business debts? But investment or through | nal, family, or househole resiness debts are debts to the operation of the bo | d purpose." that you incurred to obtain usiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that | er 7. Do vou estimate tha | at after any exempt prope o distribute to unsecured | rty is excluded and administrative creditors? |
| ^{18.} How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,0 5,001-10, 10,001-25 | 000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,0 \$50,000,0 | 01-\$10 million 001-\$50 million 001-\$100 million ,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| ^{20.} How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,0 \$50,000,0 | 01-\$10 million 001-\$50 million 001-\$100 million ,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| For you | correct. If I have chosen to file under 0 of title 11, United States Cod under Chapter 7. If no attorney represents me a out this document, I have obt I request relief in accordance I understand making a false s | Chapter 7, I am aware le. I understand the reland I did not pay or agtained and read the nowith the chapter of titletatement, concealing by case can result in fin | that I may proceed, if eli ief available under each ree to pay someone who tice required by 11 U.S. e 11, United States Coo property, or obtaining m | de, specified in this petition. noney or property by fraud in nprisonment for up to 20 years, or |
| | Executed on2/13/201 | 17 DD / YYYY | Executed on | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 68 of 71

| Fill in this infor | mation to identify your c | ase: | | |
|---------------------------|---------------------------|-------------|------------------------------|--|
| Debtor 1 | Denise | | Franklin | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (State) | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: | Sign Below | | |
|--------------------|---|---|--|
| Did | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | |
| [V] | No | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| To the same of the | | | |
| | | | |
| 1000 | ler penalty of perjury, I declare that I have read the summary a | and echadulae filed with this declaration and | |
| | t they are true and correct. | and solleddies med with this designation and | |
| X /s/ | Denise Franklin | × | |
| Sign | ature of Debtor 1 | Signature of Debtor 2 | |
| Date | 2/13/2017 MM/DD/YYY | Date MM/DD/YYYY | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 69 of 71

| Debtor | 1 Denise | | Franklin | Case number (if known) |
|---------|---|---------------------------|------------------------------|--|
| | First Name | Middle Name | Last Name | |
| | ithin 2 years before you file editors, or other parties. | ed for bankruptcy, did y | ou give a financial staten | nent to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details bel | ow. | | |
| • | •• | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | | |
| | City State | Zip Code | _ | |
| Part 12 | Sign Below | | | |
| | | in fines up to \$250,000, | | perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of D | A V V A COLL | | Signature of Debtor 2 |
| | Date 2/13/20 | 17 | | Date |
| Did | you attach additional pag | es to Your Statement o | f Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| | No Yes | | | |
| Did | you pay or agree to pay so | meone who is not an a | ttorney to help you fill ou | t bankruptcy forms? |
| V | No | | | |
| 靣 | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 70 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Franklin, Denise | Case No | Case No. | | |
|-----------------|------------------|---|--------------------------------------|--|--|
| | Debtor(s) | 0000110 | | | |
| | | Chapter. | Chapter13 | | |
| | VERIF | ICATION OF CREDITOR MAT | RIX | | |
| T1 knowledge | | rify that the attached list of creditors is tr | rue and correct to the best of their | | |
| Oate: | 2/13/2017 | /s/ Franklin, Den Franklin, Denise Signature of Del | Vi way for | | |

Case 17-04268 Doc 1 Filed 02/14/17 Entered 02/14/17 19:37:34 Desc Main Document Page 71 of 71

| Debto | r 1 Denise | | Franklin | Case number (if known) | | |
|--|---|---|---|--|--|--|
| could be a second of the secon | First Name | Middle Name | Last Name | | en seksi saasaa saksa ka | |
| 16. | Calculate the median fa | amily income that applies to yo | ou. Follow these steps | • | | |
| | 16a. Fill in the state in wh | nich you live. | Illinois | | | |
| | 16b. Fill in the number of | people in your household. | 2 | | | |
| | | mily income for your state and siz | | | \$65,659.00 | |
| | household using the link specif | ied in the separate instructions fo | To find r this form. This list m | I a list of applicable median income amounts, go online ay also be available at the bankruptcy clerk's office. | | |
| 17. | How do the lines compa | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | |
| | U.S.C. § 1325(| re than line 16c. On the top of pa (b)(3). Go to Part 3 and fill out (r current monthly income from lin | Calculation of Dispos | ck box 2, <i>Disposable income is determined under 11</i> sable Income (Official Form 122C-2). On line 39 of that | | |
| Part 3 | Calculate Your Co | ommitment Period Under | 11 U.S.C. §1325(b) |)(4) | | |
| 18. | Copy your total average | monthly income from line 11 | • | | \$3,721.47 | |
| 19. | Deduct the marital adju commitment period unde | ustment if it applies. If you are er 11 U.S.C. § 1325(b)(4) allows | married, your spouse i you to deduct part of y | s not filing with you, and you contend that calculating the your spouse's income, copy the amount from line 13. | | |
| | 19a. If the marital adjustr | ment does not apply, fill in 0 on li | ne 19a. | | -\$0.00 | |
| | 19b. Subtract line 19a | from line 18. | | | \$3,721.47 | |
| 20. | Calculate your current | monthly income for the year. I | follow these steps: | | | |
| | 20a. Copy line 19b. | | | , | \$3,721.47 | |
| | Multiply by 12 (the | number of months in a year). | | , | x 12 | |
| | 20b. The result is your cu | urrent monthly income for the year | ar for this part of the fo | orm. | \$44,657.64 | |
| | 20c. Copy the median fa | mily income for your state and si | ze of household from | line 16c. | \$65,659.00 | |
| 21. | How do the lines comp | | | | | |
| | | line 20c. Unless otherwise order is 3 years. Go to Part 4. | red by the court, on th | e top of page 1 of this form, check box 3, The | • | |
| | Line 20b is more that 4, The commitment | an or equal to line 20c. Unless ot period is 5 years. Go to Part 4. | nerwise ordered by the | e court, on the top of page 1 of this form, check box | | |
| Part | 4: Sign Below | | | | | |
| | By signing here I de | eclare under penalty of periury tha | t the information on th | nis statement and in any attachments is true and correct. | | |
| | 2) o.gg | 13/ | | , | | |
| | /s/ Denise Fr | | _) * | Signature of Debtor 2 | | |
| | Date 2/13/201 MM/DD/\ | | | Date MM/DD/YYYY | | |
| | | | | Control of the Contro | | |
| | | do NOT fill out or file Form 1220 fill out Form 1220-2 and file it w | | 39 of that form, copy your current monthly income from li | ine 14 | |